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**DOCUMENTS**

**OF**

**The Civic Federation of New Haven**

**No. 13**

**The Health of New Haven**

**By PROF. IRVING FISHER**

**of Yale University**

**NEW HAVEN**

**November, 1913**

# DOCUMENTS

OF THE

## Civic Federation of New Haven

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Copies of the above documents are for distribution, and can be had of Robert A. Crosby, Executive Secretary of the Civic Federation, by addressing him at Room 709, Chamber of Commerce Building, New Haven, Conn.

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# THE HEALTH *of* NEW HAVEN

BY

IRVING FISHER

YALE UNIVERSITY

New Haven, in spite of many shortcomings, has in recent years made so much progress in hygiene that she compares not unfavorably with most American cities. The Department of Health and the Health Officer, Dr. Wright, have accomplished much when we consider the total inadequacy of their appropriations. We have for years had anti-spitting ordinances. These have never been properly enforced. Yet they have gradually developed something of a sentiment against the filthy and un-hygienic habit of spitting indiscriminately. We are beginning to see the effects of the Gaylord Farm Sanatorium, both in restoring tuberculous invalids to health and in educating their families, friends and neighbors in the prevention of tuberculosis.

We have an active and efficient Visiting Nurse Association which is financially aided by the Metropolitan Life Insurance Company for the benefit of its policy holders. We have a Day Camp for tuberculous invalids conducted by the Visiting Nurse Association. We have an active Consumers' League interested in pure foods and the establishment of Pure Milk Stations. We have the Lowell House Settlement. The Water Company has installed, for some of its supply, water filters of the most approved type. The milk inspection, though far from adequate, has greatly improved. The milk producers and the milk dealers have been somewhat "educated" by the Department of Health, so that now the chief milk contamination is probably in the homes of consumers. These now need more "educating" than the milk producers or dealers. This could best be done by visiting nurses, milk depots, and public lectures, under the auspices of the Department of Health. We have now a State law forbidding the importation of tuberculous meat.

The city tenements are somewhat influenced for the better by the Tenement Law of a few years ago, and by its more recent amendments. Privy vaults on sewered streets are fast disappearing, over several hundred having been abolished in the last year and only about four hundred being now left. We have established a fresh air school. After many years of waiting and struggle, we are to remove the reproach that a city of our size and standing should be without an isolation hospital.

A beginning campaign has been waged to rid ourselves of the malarial swamps through the activity of the Civic Federation under the leadership of Dr. Bartlett, Dr. Gompertz and Dr. Britton, the State Entomologist. This follows a mosquito survey of the Connecticut coast made some years ago by Dr. Britton, showing the importance of draining the marshes about New Haven and of cover-

ing with oil, every ten days during the mosquito season, such portions as cannot be drained.

We have already reaped some returns from these various improvements by a reduction in mortality especially among infants. And yet these improvements touch only the outer fringes of the health problem. New Haven has still much to be ashamed of in comparison with some American cities, and almost all American cities have much to be ashamed of in comparison with London and other up-to-date municipalities abroad, as well as some of our "colonial" territory, especially Panama. This will always be so until two conditions are remedied: public apathy and inefficiency in American boards of health. Until recently, Connecticut was the dumping ground for tuberculous meat which neighboring states would not take. It is still true that the meat slaughtered locally is under no government inspection. Some of this meat is wholly unfit for food. To improve the quality of the local supply of meat, we need a municipal slaughter house, for which, under the leadership of Dr. Wright, a movement is now in progress.

To insure ourselves against typhoid, we need to pay attention (1) to our stables, (2) our privies, (3) our garbage, (4) our sewerage, (5) our milk, and (6) our water. With these improvements, New Haven should be practically free from typhoid. It is now known that typhoid is carried largely by the common house fly or, as it is coming to be called, the "typhoid fly." To exterminate the flies, we must attack their breeding places, which are mostly in horse manure. Our stables should, during the fly season, be cleaned of manure every five days and at other times the manure heaps should be kept covered. Flies carry typhoid on their feet from privy vaults to the food in our kitchens. There are probably in New Haven over 400 privy vaults—a disgraceful condition for any city. A large number of these are on sewered streets and could be connected with the sewers if the owners were compelled to make the connections. We have ordinances requiring such connections. The Board of Health is closing many of these vaults every year but special appropriation should be made, if necessary, for closing them all, liens being put upon the property when the owners are unable to pay at once. The fight against the fly must be largely waged in our garbage cans and no student of the garbage question will claim that it has yet been settled. The removal of ashes is unsatisfactory, especially in tenement districts, where the ashes often accumulate filth. Our clam and oyster beds have been polluted by our sewers. The Board of Health deserves much credit for its courageous order forbidding the taking of oysters and clams from the inner harbor, especially in view of the strong opposition of the oyster interests and the surprising indifference of the public, the beneficiaries. Milk has always been a common source of typhoid. The milk supply of New Haven comes from some 120 different milk men. The inspection of the farms, dealers and bottling stations is inadequate. We need a law against selling dipped milk. Another method, which has been found effective in Montclair, N. J., is for the Health Board to publicly post a bacterial count of the various milk men. I believe the Board of Health owes it to the

consumer of milk to let him know just what sort of milk he is buying. Typhoid in New Haven has in the past been traceable also to infected water supply. We need to extend the filter system to include our whole supply.

We need more thorough medical inspection of school children. This not only prevents infection among school children and the consequent carrying disease from one home to others, and also prevents the progressive development in the individual child of dental decay, bad eyesight, hearing or other disabilities, but it also affords a means of educating the child and through the child its parents, in some of the elementary facts of hygiene.

The matters which have been mentioned all relate to the prevention of infection. Hygienic progress during the last few decades has consisted almost exclusively in the prevention of infection. This is a natural and proper result of the discovery of the germ character of many diseases. They constitute for the most part the *acute* diseases—typhoid, smallpox, scarlet fever, etc. But there is another class of diseases equally important—most diseases of the kidney, liver, stomach, heart, blood vessels and nerves. These may be called the *chronic* diseases, the control of which depends on the personal habits of the individual. The two classes of diseases should be carefully distinguished. Acute diseases are usually given from one person to another by germs. Chronic diseases are given by a man to himself by over-eating, the use of alcohol, tobacco and drugs, lack of sleep or recreation, over-work and worry, and last but not least by bad housing conditions.

The prevention of infectious diseases is accomplished by stopping their communication through isolation and destruction of their carriers such as mosquitoes and flies, by vaccination, disinfection, street cleaning, school inspection. Chronic diseases, on the other hand, are to be prevented by changing wrong habits of living of the individual. This is accomplished partly by pure food laws, partly by tenement laws, partly by playgrounds, clean streets and good housing, but chiefly by the education of the public.

Few people yet appreciate the fact that while acute and infectious diseases on the one hand have been decreasing rapidly through the intelligent application of public hygiene, yet chronic and degenerative diseases, on the other hand, have been steadily increasing. This fact has at last attracted the attention of life insurance companies, leading to a campaign of education of their policy holders. We need such a campaign in New Haven. Until recently it has not been recognized as a function of Boards of Health to educate the people and in New Haven little or no thought has been given to this subject. Such health education as the people can get comes from the New Haven County Anti-Tuberculosis Association, the New Haven Dispensary, the Consumers' League, the District Nurses' Association, the Civic Federation, the United Workers and other similar organizations; but it is now being recognized that the most effective means of such education must be through the Boards of Health, in co-operation with newspapers and moving picture shows and the public schools. The moving pictures display vividly the life history of the typhoid fly, the "trail of the germs" in tuberculosis and the story of



dental decay and prevention. Chicago has led in this matter through the energy of its former health officer, Commissioner Evans. It maintains a low death rate and saves thousands of lives. New York is beginning to follow Chicago's example.

In Chicago, the newspapers printed Dr. Evans' "healthgrams" and the people read them with avidity.

Latterly Dr. Wright has published popular comments in the Monthly Report of the Board of Health and recently attracted some attention as well as provided some entertainment by pointing out the hygienic evils of kissing. As this educational work expands, the Board of Health will find itself in closer touch with the public.

In this work of popular education the newspapers must play an important part. Many of them are beginning to feel a sense of responsibility on this score, especially to note the incongruity of preaching health in their news and editorial columns while spreading disease through their advertising columns. At least one of our local papers has awakened to a sense of public responsibility on this score. The movement toward cleaner advertising in newspapers and other periodicals is making rapid strides elsewhere. Some magazines like *Collier's* and the *Ladies' Home Journal* have not only eliminated immoral and unhygienic advertising, especially of "patent medicines", but have entered on a crusade against nostrums and appliances which undermine the stamina of our people. Some newspapers, like the *North American* of Philadelphia, have adopted stringent rules as to its advertising, such as the following:

- (1) To exclude obscene announcements.
- (2) To exclude matter palpably fraudulent.
- (3) To exclude children's remedies containing large quantities of opiates.
- (4) To exclude preparations for adult use which contain drugs or alcohol in habit-forming quantities.
- (5) To exclude all advertisements of remedies in which statements of the word "cure" were made.

One reason assigned for such rules was that the paper was not free to preach clean living until it practiced it. Evidently any newspaper which advertises immorality and quackery ties its hands for any service in a health campaign. But when through an enlightened following of public sentiment all decent newspapers follow the examples which some are now setting, we shall not only be rid of a powerful publicity force for evil but shall acquire in its place a powerful publicity force for good.

One great need to which our city is gradually awakening, and for which it has already made partial provision, is for playgrounds and healthful amusements. These are useful in many important though subtle ways. They induce physical exercise, the use of more fresh air, mental relaxation and enjoyment and a taste for those natural and simple modes of spending time to the exclusion of unhygienic and immoral methods, such as drinking, gambling and other unmentionable practices.

I have grouped the health problems of New Haven under two classes, one relating to the prevention of acute and infectious dis-

eases and the other to the prevention of chronic or personal diseases. But the two cannot be altogether separated and there is one problem in which they are inextricably interwoven. I refer to the tenement problem.

It is in the bad tenements that we find the worst evils—overcrowding, neglect of garbage and sanitation, accumulation of filth in air-shafts, carrying of diseases by flies, and contagion; but these conditions also mean to the individual lack of fresh air and sunlight as well as lack of opportunity to practice decent hygienic, personal habits. For these reasons tenements are the homes of tuberculosis which is at once an infectious and a degenerative disease. During the year 1911, seventy-three tenements, accommodating from six to sixteen families each, were erected in New Haven. These menace the health and morals of the city. Many of these large tenements are frame and without adequate fire protection. If the working people in Washington, Baltimore and Philadelphia can be accommodated in one or two-family houses, surely this ought to be possible in New Haven. On Hill Street a first-floor, three-room apartment in a tenement house for six families was occupied by an Italian, his wife and three children; five lodgers were kept, who have beds in the front room, the family occupying the middle room and the kitchen. No tenement house census has ever been made for the whole city of New Haven. The only careful studies of tenement house conditions in New Haven have been made by the initiative of public-spirited citizens or associations, one in 1903 covering one section of the city, by Lowell House, and another in 1912 by the Civic Federation. There is practically no tenement inspection. Only night inspection will reveal how much overcrowding exists. On State Street where a woman died recently, it was found that the husband, wife and two daughters slept in one bed.

There has been started in New Haven a movement for the erection of better tenements on a semi-commercial basis after the model of the Homes Companies of New York and other cities. The first model tenement is now being erected. It is to be hoped that this movement, combined with education in household economics or good housekeeping, together with better and stricter laws, may arrest the tendency toward overcrowding. The use of the public schools as a center and medium for disseminating health education should not go unmentioned. In some respects this is the most promising of all means of building up healthy citizens in the next generation. In order to secure our health reforms, we certainly need (1) to educate public sentiment, and (2) to supply the sinews of war to the Health Department. It would, in my opinion, also be an advantage to modify our present multiple board of health by making it frankly advisory and not dividing responsibility with the health officer.

The experience of the Philippines, of Panama, of the State of Pennsylvania, of New York City and of other places indicates that boards constituted as ours is, however capable its members may be individually, are seldom very efficient. This inefficiency is due to division of responsibility rather than to individual incapacity.

The health officer should be held strictly accountable for his work and should have a long term of service subject only to dismissal for cause.

The returns which could be reaped from a better health administration and better health laws are incalculable. Even on a purely commercial basis hygiene pays. Dr. Britton and others have shown that the cost of exterminating malaria by draining and oiling the marshes is repaid in actual cash many times over by better crops, better land values, and better earning power of the population.

When Gaylord Farm Sanatorium was established eight years ago, a local, hard-headed, cynical business man, in refusing to contribute money, asked the late Dr. J. P. C. Foster if he really thought that this attempt to fight tuberculosis would "pay." We are now prepared to answer his question in the same hard, cold-cash terms. The treatment of patients, including interest on plant, has cost thus far \$278,000, and the patients whose lives were thus saved as bread winners for their families have earned \$706,000, besides having still left a potential earning capacity conservatively appraised at \$2,500,000. Even this does not exhaust the commercial value of the benefits derived from the expenditure of the \$278,000. In fact, the chief benefit has not been included; this is the spread of the gospel of health.

Tuberculosis is one of the slowest and most expensive of diseases, and if a calculable return of nine-fold on the investment can be obtained within a few years in the fight against tuberculosis, a far larger return can be obtained in fighting other diseases. In fact, equally definite and convincing data for other diseases could be given.

These data are not in the realm of speculation, but represent the actual, practical achievements in other places. Consider, for instance, that wonder of the world, the cutting in two of the death rate in London in a quarter of a century. London, the seat of the worst visitations of epidemics in Europe, the awful sufferers from the Black Death, the type in former times of bad sanitation, has now a death rate of thirteen per thousand, one of the very lowest of the cities of the world and *very considerably lower than New Haven*. It is easily within our power, with a population incomparably smaller and sparser to reduce our own mortality until it is again where it ought to be, below that of London or any other city larger and more crowded than itself. We owe it to ourselves, to our children and our children's children to do this; and not to do it is, in fact, if not in law, criminal negligence. Dr. Park, Health Commissioner of Rockford, Ill., after an extensive comparative study of expenditures by city health departments, assigns 85 cents per capita as the very least for which adequate results can be obtained for cities of the size of New Haven. Our actual expenditures amount only to about 20 cents per capita.\*

In the light of these facts, how trivial seem the objections to making more generous health appropriations on the plea of saving the taxpayers' money or avoiding the hardship or expense to the house owner or the collector of garbage. Such a view is "penny



wise and pound foolish"; it is saving the penny to the taxpayer, the property owner or the contractor and losing the pound to the city of New Haven. It is sometimes said that the greatest enemy of hygiene is commercialism, but this is a misleading statement. The truth is that the greatest friend of commercialism is hygiene. The real conflict is between the special interests of the few and the general interests of the many. In a broad way, better health is not a means of spending money, but a means of saving money. The courageous administration of a public health office will not hurt, but help, the commercial interests of the community. It is better to advertise by showing good health conditions than by concealing the existence of bad health conditions. In Springfield, Illinois, the health officer has had the courage to publish a map showing the location of the privy vaults throughout the city. Doubtless he has temporarily injured the value of property of these streets, or, rather, revealed its truer value, but real estate men have also used his map to enhance the value of property on other streets. Life insurance companies are now trying to make money by lengthening human life and some municipalities are trying to make money by advertising better health conditions. The enterprising town of Winfield, Kansas, boasts of having more bath tubs and sleeping porches than any other town in Kansas. Some day it will pay New Haven to boast not only of a pure water supply, but also a pure milk supply, a pure meat supply, a pure air supply and a low death rate.

### SPECIAL HEALTH NEEDS IN NEW HAVEN

1. The reorganization of the existing Health Department, in order to make it more efficient and up-to-date. This could be done in various ways, one of which might be by converting the Board of Health into a purely advisory body and having only one Health Officer or Commissioner, who should be held strictly responsible to the Mayor for the conduct of his office.

2. More funds for the Health Department, to be used for more inspectors, officers, milk depots, visiting nurses, lectures on health, etc. An immediate increase of 50 per cent. is needed to accomplish what the Board of Health has in view. This would make 30 cents per capita.\* Dr. Wright has found by actual inquiry that all American cities with a population of from 75,000 to 200,000 have larger appropriations than New Haven.

3. More funds for the *Building Inspector*, to be used for the employment of deputy inspectors, etc., in order that he may prevent violations of the Connecticut Tenement House Law prescribing sizes of courts, etc.

4. All garbage to be removed *at least* every five days during the summer. In fact, twice or three times a week in hot weather would be none too often. The method of garbage collection and disposal should be improved. The municipal collection under the department of public works has, for some reason, proved a great disappointment.

5. The abolition of all *vaults* on sewered streets and their periodical disinfection on unsewered streets, an appropriation being made for these purposes.\* \*

6. The passage of the proposed ordinance requiring all *horse manure* to be removed at short intervals.\*\*\*

7. An investigation aiming to discover a better method of disposing of *city sewage* so as not to contaminate the oyster and clam beds of the harbor.

8. The draining and oiling of *malarial swamps*. The city of New Haven has only a small area of swamp land. This could be easily drained and utilized for parks and playground purposes.†

9. The establishment of a *municipal slaughter house* where local cattle can be butchered under an inspector. This could be made self-supporting by the imposition of a small fee. The cost of such a slaughter house, I am told, would probably be about \$2,000.‡

10. The prohibition of the sale of *dipped milk*.¶ The passage of a law requiring approval by the Board of Health of the procedure employed in sterilizing milk. The adoption of the proposed ordinance requiring milk to be cooled soon after milking, kept cold and delivered cold.

11. Further improvements in the Tenement House Act. The Board of Health should keep a continuous life history of each tenement, the occurrence of diseases, disinfection, etc.

12. The extension and more generous support of the work of the Visiting Nurse Association and the United Workers (in the work of their visiting housekeepers). These organizations at present are our chief hope for educating the masses in sanitary housekeeping and personal hygiene.

13. The establishment of more fresh air schools such as those in use in Providence, Chicago and other cities, including South Manchester in this State. We have, however, as above stated, made a beginning.§

14. The better use of our schools for teaching and demonstrating hygiene to the pupils during school hours and to the public at evening meetings.

15. We should have a carefully-guarded law making it possible to remove children from families in which there is tuberculosis or other menace to health. We can remove morally-imperilled children and should be able to remove physically-imperilled children.

16. More playgrounds.

17. The complete elimination of unhygienic advertising by our newspapers.

18. Last but not least, an enlightened public spirit appreciative of the overwhelming importance of maintaining public health.

\* Since this was written, most of the increase suggested has been granted.

\*\* Since this was written, provision has been made to abolish all vaults on sewer streets by April 1, 1914.

\*\*\* Since this was written, such an ordinance has been passed.

† Since this was written, an appropriation of \$3,000 has been made for draining swamp-lands in City Parks.

‡ Since this was written, the Board of Aldermen has recommended such a slaughter house and the matter will be considered by the Board of Finance.

¶ Since this was written, a committee of the Board of Aldermen has recommended such an ordinance, and it will undoubtedly soon be passed.

§ Since this was written, a new open-air school has been provided for.

# DO IT FOR NEW HAVEN

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*That city is well fortified which hath a wall  
of men instead of brick.* —Lycurgus.

## ARE YOU INTERESTED IN NEW HAVEN?

If your answer is "no," you waste your time reading this page.  
If it is "yes," what is written will help you and your city.

## ARE YOU WORKING FOR NEW HAVEN?

Are you doing your best to make New Haven a city in which you are proud to live and work; a city you are proud to say is your home, or are you letting the "other fellow" do the work while you enjoy the benefits of his labor?

## DO YOU KNOW THE NEEDS OF NEW HAVEN?

Have you accurate information as to Schools, Playgrounds, Housing, Streets, Parks, Public Health, our Dependents and Defectives, our Industrial Situation, etc., and what is needed to improve conditions?

## HOW YOU CAN HELP NEW HAVEN

First, you must know New Haven's needs, and second, you must co-operate with others to meet these needs.

## ENROLL AS AN ACTIVE CITIZEN

by sending the following letter:

*Victor M. Tyler, Treas.,  
Civic Federation of New Haven:*

Enclosed please find \$1.00 as my membership fee for one year in the Civic Federation of New Haven.

I wish to enroll as an active citizen and receive the monthly documents and notices of meetings of the organization.

Signed

Address



VIII nerve glial portion  
portion is more likely  
the part most affected by injury  
syphilis 6-15 yrs later. see third  
stage with primary Congenital Syphilis